

PATENT APPLICATION SERIAL NO. _____

U.S. DEPARTMENT OF COMMERCE
PATENT AND TRADEMARK OFFICE
FEE RECORD SHEET

10/25/1999 JWASHING 00000014 071895 09420433

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PTO-1556

(5/87)

*U.S. GPO: 1998-433-214/80404

#3/A
OR
10/17

10/12/99
1C594 U.S. PTO

PATENT
Attorney Docket No. JHU1180-1

X CONTINUATION
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09/420433

Box Patent Application
Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

Transmitted herewith for filing is the **continuation** patent application of

Inventor(s): David Sidransky

For: **NUCLEIC ACID MUTATION DETECTION IN HISTOLOGIC TISSUE**

This is a request for filing a continuation application under 37 C.F.R. 1.53(b), of prior U.S. application Serial No. 08/181,664; filed on January 14, 1994, now pending, which is entitled NUCLEIC ACID MUTATION DETECTION IN HISTOLOGIC TISSUE by the following named inventor: David Sidransky.

Enclosed are:

	<u># of Pages</u>
Specification	75
Claims	3
Abstract	1
Drawings [# of Sheets]	9
Declaration/POA	1
Small Entity Declaration	1
Sequence Listing	29
Information Disclosure	1

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Filing fee to be charged to Deposit Account No. 07-1895 in amount of 380.00

This application claims priority under 35 U.S.C. § 120 to U.S. Patent Application Serial No. 08/181,664, filed January 14, 1994, the contents of which are both incorporated by reference in their entirety herein.

In re of Application of
David Sidransky
Filed: Herewith
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Prior to examination, on page 1, after the title, please insert - This application claims priority under 35 U.S.C. § 120 to U.S. Patent Application Serial No. 08/181,664, filed January 14, 1994, the contents of which are both incorporated by reference in their entirety herein. -

FULL NAME OF FIRST INVENTOR	LAST NAME: Sidransky	FIRST NAME: David	MIDDLE NAME:
CITIZENSHIP	STATE OR FOREIGN COUNTRY: USA		
POST OFFICE ADDRESS	POST OFFICE ADDRESS: 3007 Northbrook Road	CITY AND STATE: Baltimore, Maryland	ZIP CODE: 21209
FULL NAME OF SECOND INVENTOR	LAST NAME:	FIRST NAME:	MIDDLE NAME:
CITIZENSHIP	STATE OR FOREIGN COUNTRY:		
POST OFFICE ADDRESS	POST OFFICE ADDRESS:	CITY AND STATE:	ZIP CODE:
FULL NAME OF THIRD INVENTOR	LAST NAME:	FIRST NAME:	MIDDLE NAME:
CITIZENSHIP	STATE OR FOREIGN COUNTRY:		
POST OFFICE ADDRESS	POST OFFICE ADDRESS:	CITY AND COUNTRY:	ZIP CODE:

No payment of the issue fee, abandonment of, or termination of proceeding has occurred in the above-identified prior application.

1. ☐ Cancel in this application original claim(s) _____.
2. ☐ A preliminary amendment is enclosed.

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The filing fee has been calculated as shown below:

For	Number Filed		Number Extra		Rate			Fee	
					Small Entity	Other Entity		Small Entity	Other Entity
Total Claims	18	=	0	X	\$9	\$18	=	\$ 0.00	\$.00
Independent Claims	3	=	0	X	\$39	\$78	=	\$ 0.00	0
Multiple Dependent Claims Presented: ___ Yes <u>X</u> No					\$130	\$260			0
BASIC FEE					\$380	\$760		\$380.00	\$ 760.00
					TOTAL FEE			\$380.00	\$0.00

3. X Please charge my Deposit Account No. 07-1895 the TOTAL FEE of \$380.00 which covers the filing fee for this application. A duplicate copy of this sheet is enclosed.
4. X The Assistant Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 07-1895. A duplicate copy of this sheet is enclosed.
- X Any additional filing fees required under 37 C.F.R. 1.16.
X Any patent application processing fees under 37 C.F.R. 1.17.
5. ___ Amend the specification by inserting on line ____, page ____:
- This application is a divisional of application Serial No. _____, filed on _____, now pending, which is a divisional of U.S. application Serial No. _____, filed on _____, now pending, the entire contents of which are hereby incorporated by reference herein.
6. X A verified statement claiming small entity status was filed in parent application, Serial No. 08/181,664, filed on January 14, 1994, and such status is still proper.
7. X The prior application is assigned of record to The Johns Hopkins University School of Medicine by assignment recorded on April 1, 1994, at Reel/Frame 6953/0643.
8. X The power of attorney in the prior application is to Lisa A. Haile, Registration No. 38,347.
9. ___ Please transfer the drawings from the prior application to the new application.

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10. X A copy of the prior application as filed is enclosed, including a copy of a Combined Declaration and Power of Attorney filed in parent application, U.S. application Serial No. 08/181,664, filed on January 14, 1994.
11. X Permission to Use Sequence Listing of parent priority is enclosed along with paper copy of Sequence Listing.
12. X Information Disclosure Statements filed in the prior application under 37 C.F.R. 1.97 are hereby made of record. Copy of PTO-1449 is enclosed.

Address all future communications to:

Lisa A. Haile, Ph.D.
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4365 Executive Drive, Suite 1600
San Diego, California 92121-2189
Telephone: 858-677-1456
Facsimile: 858-677-1465

The undersigned states that the enclosed application papers comprise a true copy of the prior application as filed.

Respectfully submitted,

Date:

10/12/99

Lisa A. Haile, Ph.D.
Attorney for Applicant
Registration No. 38,347
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